Ar	plica	tion	or	Docket	Num	her
, ,,	/P::\U		~	DOCKEL	IVUII	IVEI

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
505						Column 2) TYPE				OR	SMALL ENTITY	
FOR		N	NUMBER FILED		NUMBER	NUMBER EXTRA		TE	FEE	1	RATE	FEE
BASIC FEE								(.	345.00	OR		690.00
TOTAL CLAIMS			4,0	minus	20= + 5 i)		X\$	9=		OR	X\$18=	360
INDEPENDENT CLAIMS					3 = * /		ХЗ	9=		OR	X78=	70
MULTIPLE DEPENDENT CLAIM PRESENT							+13	^			.000	ι ο
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	+260=	1110	
							TOT	AL		OR	TOTAL	1125
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	OTHER TH. SMALL ENTITY OR SMALL ENT					
AMENDMENT A	100	CLAII REMAII AFTE AMENDI	NING ER	- 1 · · · · · · · · · · · · · · · · · ·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA ⁻	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*		Minus	**	=	X\$	9=		OR	X\$18=	
AME	Independent	*		Minus	***	=	X39)=		OR	X78=	
	FIRST PRESE	NIAHON	OF MU	ILTIPLE DEF	PENDENT CLAIN		+13	0=		OR	+260=	
								TAL			TOTAL	
		(0 - 1,	41			10 1 = 1	ADDIT.	FEE	-	OR ,	ADDIT. FEE	
		(Colum		7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	(Column 2) HIGHEST	(Column 3)						
AMENDMENT B		REMAIN AFTE AMENDI	R		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	=	X\$ 9) =		OR	X\$18=	
AME	Independent			Minus	***	=	X39	=		OR	X78=	
	FIRST PRESE	NTATION	OF MU	LTIPLE DEF	PENDENT CLAIM							
							+130)= TAL		OR	+260= TOTAL	
		•					ADDIT.			OR ,	ADDIT. FEE	
_		(Colum			(Column 2)	(Column 3)					•	
ENT C		REMAIN AFTE AMENDN	NING R) 1	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*		Minus	**	=	X\$ 9	_		OR	X\$18=	
	Independent	*		Minus	***	=				ı		
٨	FIRST PRESE	NTATION	OF MU	LTIPLE DEP	ENDENT CLAIM		X39			OR	X78=	
• 1	f the entry in colum	mn 1 is less	than the	ontry in colum	mn 2, write "0" in co	l 2	+130	=		OR	+260=	
**	f the "Highest Nur	mber Previo	ously Paid	d For" IN THIS	TIN 2, Write "0" IN CO S SPACE is less tha S SPACE is less tha	ın 20. enter "20."	TO ADDIT. I	TAL EE		OR ,	TOTAL ADDIT. FEE	
					Independent) is the							